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ROLE OF THE RESEARCH UNIT

The South Australian Community Health Research Unit (SACHRU) strives to enhance health and wellbeing in South Australian communities. It does this by assisting community health and primary health care agencies and groups to undertake and use the findings from research and evaluation to make services more effective in maintaining and improving the health of their communities.

SACHRU aims to undertake and advocate for primary health care research and evaluation which:

- Focuses on issues of equity
- Takes a social view of health and wellbeing
- Has implications for policy and practice
- Involves, and is responsive to, all relevant players
- Is independent, rigorous and has academic excellence
- Is disseminated widely and in appropriate ways.

SACHRU is funded by the South Australian Department of Human Services (DHS) to provide a primary health care research and evaluation service for community health services and related agencies and groups that are funded by the DHS in metropolitan and country South Australia. It is also funded to provide advice to the DHS on research and evaluation within the context of the DHS Strategic Plan.

The Role of SACHRU is to:

- Assist the DHS and service providers to determine needs and priorities for community and primary health care research and evaluation
- Develop research and evaluation methodologies suitable for use in a primary health care setting
- Design and conduct primary health care research projects
- Obtain and manage externally funded research grants and consultancies in community and primary health care
- Disseminate research and evaluation findings
- Provide research and evaluation support to community health services and primary health care programs
- Provide training, staff development and support to community and primary health care workers in relation to research, evaluation and primary health care development
- Monitor and disseminate Australian and overseas research relevant to primary health care policy and practice
- Undertake critical appraisal of policy and programs relevant to primary health care.
MANAGEMENT ADVISORY COMMITTEE

Since its formation in 1991, SACHRU has been supported by a Management Advisory Committee, which meets every two months. At each meeting, the SACHRU Director reports on activities and progress over the last two months, and seeks advice on various management matters including workshop programs and planning days. An Executive consisting of the Chair and Deputy Chair can be called upon for matters requiring urgent attention.

2001/2002 Membership

Prof. Fran Baum
South Australian Community Health Research Unit

Ms Karen Dixon
Noarlunga Health Services

Ms Joanne Gell and Ms Julie LeCornu
Northern Metropolitan Community Health Service

Mr Andrew Stanley
Strategic Planning and Policy Division, Department of Human Services

Prof. Andrew Butcher
School of Medicine, Flinders Medical Centre

Ms Penny Markham
Inner Southern Community Health Service

Mr Kevin Eglinton
Hills Mallee Southern Regional Health Service

Ms Adair Garrett (Chair)
Northern Metropolitan Community Health Service

Ms Debbie Law
Allied Health, Flinders Medical Centre

Ms Bernadette Roberts
Women’s Health Statewide

Ms Di Jones
Adelaide Central Community Health Service

Ms Pat Pearson
Adelaide Central Community Health Service (to October 2001)

Mr Frank Kinnear
Adelaide Community Health Service (from October 2001)

Mr George Beltchev
Central & Southern Metropolitan Division, Department of Human Services

Mr Frank Tesoriero
South Australian Community Health Association (until April 2002)
Ms Marj Ellis  South Australian Community Health Association (from April 2002)

SACHRU Staff Nominee  This position is filled by rotation.

Staff nominees for 2001-2002 were:
Danielle Bament
Janice Duffy
Megan O’Grady
Helma Hooper
LIST OF STAFF MEMBERS

Director
Professor Fran Baum B.A. (Hons.), Ph.D.
(Also Head, Department of Public Health, Flinders University of South Australia)

Senior Research Officers
Paul Aylward B.A (Hons.), M.A. (Education), PGCE, M.A. (Dist.)
Dr Janice Duffy B.A. (Hons.), Ph.D.
Gwyn Jolley B.Sc. (Hons.), PGCE, GDOH

Contract Research Officers
Danielle Bament B.A., Grad. Cert. in PHC, Masters of PHC
Cecilia Moretti B.S. (Hons.), Grad. Dip. Women's Studies (Part-time)

Research Assistant
Megan O’Grady B.Hlth.Sc.

Department of Public Health staff working on collaborative projects
Catherine Hurley
Anne Magarey
Danielle Bament
Helen van Eyk

Information Officer
Maryanne Martin (Part-time)

Administrative Assistant
Helma Hooper (Part-time)

Administrative Services Officer
Linda Weger (Part-time) (to December 2001)

Contract Administrative Services Officers
Karina Coleman (March 2002-April 2002)
Alex Porter (Part-time) (to August 2001)
Robyne Ridgeway (from May 2002)
DIRECTOR'S REPORT

Once again I am very pleased to present our Annual Report of Activities. You will see from the work of our small research and administrative group that we are a hardworking and productive team. Our research covers a range of areas relevant to the work of community health. Most centrally we are concerned with the social and economic determinants of health.

Focus and Direction for SACHRU 2002-2006

In February 2002 the Management Advisory Committee endorsed the following strategic directions for SACHRU:

SACHRU should develop and enhance a research and training profile that focuses on:

- Understanding the social and economic determinants of health and how these form a program logic for human services interventions including social inclusion strategies
- Understanding and researching the dynamics and outcomes of healthy settings approaches to health promotion, including the evaluation of community based health promotion; and
- Ensuring the transfer of research knowledge relating to primary health care from research to policy and practice, including policy analysis and strategic planning.

These areas support the strategic directions of the Department of Human Services and the implementation of the Review of Community Health Services. They are central to the work of community health services and also highly relevant to the whole DHS portfolio. They also seem to be consistent with the early outputs from the Generational Health Review. They do this by emphasising the social basis of health and importance of primary health care and health promotion to the South Australian health system.

The focus and directions build on the strengths of SACHRU and are within an area in which our team is nationally competitive. This increases the chances of the group attracting additional research funding to South Australia. SACHRU has a significant national reputation already in these areas. This focus is enabling our reputation to be strengthened and further capitalised upon.

Projects

The bread and butter of SACHRU’s work consists of conducting evaluations for community health services, often of innovative projects. A number of these are reported here including: a project using puppet theatre to promote health, other arts programs, a number of quit smoking projects, an innovative program for young people who care for their relatives and food and nutrition programs. Through these evaluations SACHRU is able to contribute to improving and refining community health programs.

We have also worked on a study that is reviewing the ways in which the effectiveness of community health services can be judged. The report, which will be completed at the end of 2002, described the various mechanisms used including performance indicators, routine data sets, economic evaluation and systematic review. This study is important to community health because it demonstrates what form of evidence base is appropriate.
We have also continued to conduct consultancy work for the World Health Organisation. This has included finishing work testing an evaluation framework with the Noarlunga Community Action on Drugs forum and completing a consultancy to write Guidelines for a new Healthy Districts initiative. We have also contracted with WHO to write a report on civil society and health which builds on earlier work done on this topic. These international links are important to SACHRU as they are an indication that our work is highly regarded and provide us with the opportunity to learn from colleagues overseas. This helps us to keep up with current international trends in community health research.

Training
In 2001-02 Paul Aylward continued his work developing the SACHRU training program. This program has proved popular with participants from across the human service portfolio. This year the program had significant input from staff of the Department of Public Health, Flinders University, which helps us keep up a full program despite the budget cuts we have suffered. In December 2001 the Planning Evaluation Wizard (PEW) was released. PEW was the brain child of Charlie Murray and provides a computer program to develop project evaluation plans. PEW is illustrated by cartoons by George Aldridge which really brings project planning and evaluation to life. This is a great resource for community health and is in high demand.

SACHRU staff have worked with the Department of Public Health, to run a successful short courses on ‘Healthy Cities’ and ‘Evaluation for Primary Health Care’.

Budget Pressures
Our budget pressures continue. In 2000-2001 SACHRU received a budget cut of approximately 12% and we have struggled to cope with this cut since then. Funding from the DHS now covers only 3.4 research positions (including all management functions) and 1.5 administrative staff. This makes us a very small Unit. As a consequence of this, most of our research staff are on contracts. The Unit staff are under continual pressure to generate additional income as well as the pressure from reviews of the role of public and community health research. I am very pleased that SACHRU is weathering this difficult period and thank the staff for coping with such a difficult environment. The close working relationship with the Department of Public Health, Flinders University has enabled us to have a larger work group and to organise joint research, training and staff development activities.

Review of Structure of Public and Community Health Research in South Australia
The Brennan Review of Public Health Research and Training was conducted in 2000-2001. SACHRU was included in the terms of reference of the Review. A major implication from the Brennan Review for SACHRU is that our service agreement includes a clause requiring SACHRU to be involved in the working group considering mechanisms to further the recommendations of the Review. SACHRU has attended these meetings throughout the 2001-02 financial year. The incoming Minister of Health, Lea Stevens, has made a welcome commitment to resolve the uncertainty surrounding funding for public and community health.
research at the earliest possible opportunity. SACHRU welcomes this commitment and looks forward to exploring in more detail plans for the South Australian Institute of Population Health.

**Management Advisory Committee**
Our Management Advisory Committee (MAC) (membership is listed on page 4 of this report) has continued to support our work and made a significant contribution to SACHRU. The Committee is made up of members from the community health services, Department of Human Services and key groups such as SA Community Health Association. Adair Garrett provided strong support for SACHRU especially when our budget was under threat. I am very grateful to her for such great and welcome support. MAC provides us with valuable comment and feedback on our work. It is an important mechanism by which we communicate with our core constituencies. I would like to thank all members of MAC for their efforts and commitment to SACHRU.

The advice and support we have received from Andrew Stanley (Director, Research and Evaluation Branch), and his staff Sarah Goulding and Helen van Eyk has been crucial to SACHRU’s work. We consider ourselves lucky to have funders who have such a well-developed understanding of our work and commitment to the role of SACHRU in the South Australian Health System.

**In Conclusion**
SACHRU is looking forward to 2003. It promises to be an exciting year. The final report from the Generational Health Review will be released. We anticipate that SACHRU will be well-positioned to contribute to the thinking and research that will be required to make the vision of the Review a reality.

Thank you to all supporters of SACHRU for your interest and appreciation of our work. The SACHRU team is looking forward to working with you in the coming year.

Fran Baum (Professor)
Director
**Research and Evaluation Activities**

*A Systematic Review of the Effectiveness of Locational Interventions to Reduce Socioeconomic Inequalities in Health*

Staff involved: Fran Baum, Janice Duffy, Colin MacDougall and Anne Kavanagh

In 2002, SACHRU staff Fran Baum and Janice Duffy along with Colin MacDougall from the Department of Public Health at Flinders University and Anne Kavanagh from Latrobe University commenced a project on locational interventions to reduce socioeconomic inequities in health. This project is based upon the rationale that there is an unequivocal link between socioeconomic status and health and that this status impacts upon health through the gradient effect that demonstrates successive increases in health status from the lower to the higher socioeconomic levels in society.

In response to this link, a number of locational initiatives to reduce socioeconomic inequities, such as the ‘Healthy Cities’ programs, and, more recently, the Health Action Zones (HAZs) have been developed and implemented. The common feature of these interventions is that they pay attention to both the compositional features in a location (e.g., the characteristics of people within it) and the contextual features (for example the nature of the physical environment and the facilities available in the community) of a location.

According to the literature on community development, local approaches to addressing health inequities have a number of advantages that can contribute to ameliorating the social determinants of health: they bring the community together to identify its specific health needs, identify and support existing communities and networks, and encourage dialogue to develop more accessible and appropriate services. Nonetheless, the evidence base for the outcomes of attempts to reduce inequities is generally considered to be quantitatively small and qualitatively poor. It is likely that this assessment results from the use of inappropriate methods of conducting the analyses rather than a lack of effectiveness of the locational interventions.

A recent Australian project has attempted to address this issue and provide a guide to appraise evidence on public health interventions. The document, *A Schema for Evaluating Evidence on Public Health Interventions: Version 4*, is designed for application to evidence in the form of research papers or evaluations that examine and describe the effects of an intervention. The Schema...
provides a guide to conducting an appraisal of individual papers or reports for information about an intervention(s) as well as a guide to formulating conclusions about the value of available evidence. The Schema includes provision for assessing reviews and economic evaluations as well as traditional experimental designs such as RCTs. The Schema is hence a considerable advance on previous guidelines for analysing qualitative and non-experimental quantitative studies.

Despite an increasing focus upon the important role of locational interventions to reduce socioeconomic health inequities there have been no published attempts to systematically review the literature. This project proposes to identify, appraise and report on evaluated locational interventions to reduce socioeconomic inequities in health. The initial stages of the review (preparation of the review proposal, the development of a review protocol and the literature scoping exercise) will be based upon accepted guidelines for preparation steps to undertake a systematic review, as published by the Centre for Research and Dissemination at The University of York. The literature appraisal and interpretation and summary of the results will be conducted according to the Schema guidelines.

Thus far, a framework including objectives and a research plan have been developed, databases across a number of disciplines have been identified and work has commenced on a plan to access ‘grey’ literature. The next stage of the project is to conduct a literature scoping exercise to refine the search strategy. The project is due to be completed in 2003 and a report will be prepared and disseminated on the process of the literature search as well on the results of the literature review.

Assessing the Effectiveness of Community Health

Staff involved: Fran Baum, Janice Duffy, Gwyn Jolley, Stacey Masters and Danielle Bament

In 2001, SACHRU’s core-funded project examined issues concerning the effectiveness of community health services. The project team undertook the project with the goal of contributing to the establishment of an evidence base in community health. The project aimed to:

- Examine the existing evidence base for the effectiveness of community health services
- Assess the applicability to community health of established methods of measuring the effectiveness of health care.
A report from the project is in preparation and will be published in early 2003.

The report will provide an overview of the role and function of community health in South Australia. Each chapter in the report will then consider alternative means of assessing the effectiveness of community health services. Each will take a critical approach and use local examples to illustrate the general points made.

The literature on economic analyses of health promotion and provide a critical assessment of their feasibility for community health will be reviewed. The literature reports a lack of consensus about the ability of economic analyses of health promotion to adequately provide data to underpin priority setting in health promotion. The chapter concludes that several important methodological and process issues need to be addressed in order for economic analyses to be useful to community health.

Routine data collection in Community Health Services in metropolitan SA and its contribution to assessing effectiveness will be examined. This work will be informed by interviews with Community Health Managers and staff with information management responsibilities. The interviews were conducted from December 2001 to March 2002, shortly after the release of the findings of a review of Community Health Services undertaken by the Metropolitan Division of the Department of Human Services. The Review had confirmed the limitations of the existing data set and foreshadowed a new client information system and advanced information communication technology for Community Health Services. The chapter will document current thinking and practice in community health services re data collection and information retrieval. It will also describe emerging information needs for community health.

The use of performance measurement as a tool to assess effectiveness of community health services will be examined. The first section will discuss performance measurement in the public sector, tracing the history and describing the terminology and approach. Uses, advantages, disadvantages and challenges will be presented. The second part will review the use of performance measurement in community health settings and the challenges in this environment. The third section will include a brief report on the South Australian project that trialed a collaborative approach to identification of performance indicators in the community health sector.
Systematic reviews and meta-analyses, the methodologies under which they operate and consider the extent to which they are appropriate for community health will also be examined. This chapter will also consider other methodologies that may be used to inform an evidence base for community health practice.

The report will conclude by drawing general lessons from the chapters concerning the effectiveness of community health and making some suggestions for future directions.

The Minister for Health, Minister Assisting the Premier in Social Inclusion, Lea Stevens will launch the report in February 2003.

**Location and Health**

*Staff involved:*  
Fran Baum,  
Anne Magarey  
and Paul Aylward

The *Location and Health* project is conducting further analyses, using factor analysis, (path analysis and multi-level modelling) of the data from the Adelaide Health and Participation study (funded by NHMRC) to consider whether location affects health and levels of participation.

A workshop for policy makers, researchers and those working in the area was conducted on the morning of November 2nd 2001. The workshop was opened by Mr Philip Fagan-Schmidt, Director, Strategic Planning and Policy, in the Planning Policy and Corporate Division, Department of Human Services. The keynote speaker was Dr Ian Winter, Research Director of the Australian Housing and Urban Research Institute and formerly Principal Research Fellow at the Australian Institute of Family Studies. Ian is the editor of *Social capital and public policy in Australia*.

Following Ian’s talk, Prof Fran Baum described the *Health Development and Social Capital* project conducted in the Western suburbs of Adelaide and the emerging findings from the *Location and Health* project. A break-out session was followed by a plenary report back and lunch.  
This workshop aimed to provide answers to the following questions:

- To what extent does emerging research on location, social capital, equity and health inform policy?
- What are the emerging policy directions relating to location, social capital and health?

The second workshop was held in March 2002. There was an opening address from Mr Andrew Stanley, DHS, linking the two
workshops and speaking about the Department” research. Mr. Greg Black, Manager of the South Australian Housing Trust gave a keynote address. A panel of policy makers then reflected on the relevance of research for their work. This was followed by a panel of researchers reflecting on policy. The workshop concluded with a lively general discussion.

Another part of the project is developing a framework to determine the characteristics of locations that support the components of social capital, such as trust in local people and participation in social activities. This work will be presented as a paper. Members of the project team have prepared two grant applications to the NHMRC.

**Healthy Cities Evaluation Framework Testing Project**

Staff involved: Fran Baum, Danielle Bament and Gwyn Jolley

The second phase of the Healthy Cities Evaluation Framework Testing Project commenced in June 2001. This involved an intermediate term impact analysis of Noarlunga Community Action on Drugs (NCAOD), which is a collaborative intersectoral community initiative auspiced under Healthy Cities Noarlunga.

The evaluation also included a short term impact analysis of an initiative auspiced under NCAOD and Child and Youth Health’s ‘The Second Story’ at Christies Beach, the Youth Drug Peer Action Project (YDPAP). NCOAD is an intersectoral community based forum that has been operating for four years with the aim of reducing the harm caused by drugs to the community of the Onkaparinga local government area. The YDPAP is an eighteen month peer education program that specifically aims to reduce the harm caused by drugs to young people in the region.

The second phase evaluation of NCAOD has involved conducting surveys and focus groups with young people in the Onkaparinga local government area to gain their perspective on the drug and alcohol free recreation available in the region. Interviews and surveys have also been carried out with NCAOD members. Results suggest strong support for NCAOD as a body able to promote networking and collaboration among service providers and community members to lead to more effective services and programs relating to drug and alcohol issues in the community.

At the time of the project, YDPAP was in a relatively early stage and thus evaluation of the program was limited. However, a
literature review was conducted on peer education programs to clarify the term ‘peer education’ and highlight strategies that are most effective.

A draft evaluation plan using the Healthy Cities Evaluation Framework was drawn up to help understand what project participants hoped to achieve as the short, intermediate and long term impacts of the project on the Onkaparinga community.

An earlier report titled *Healthy Cities Evaluation Testing Project: Evaluation of Noarlunga Community Action on Drugs* examining issues of evaluation in Healthy Cities and other complex intersectoral development programs is also available.

**Health Care Reform in Southern Adelaide Evaluation Project**

*Staff involved: Helen van Eyk, Fran Baum and Catherine Hurley*

At the end of 2001, the Australian Research Council Strategic Partnerships with Industry, Research and Training funded *Health Care Reform in Southern Adelaide Evaluation* project, a joint venture between SACHRU and the Department of Public Health, Flinders University of South Australia, was concluded. Since then, the final report has been compiled, printed and widely distributed to relevant service providers, policy makers and academics.

The project, conducted between 1998 and 2001, aimed to evaluate the impact of changes in the health system on the collaborative efforts of a group of four agencies, comprising Flinders Medical Centre, the Repatriation General Hospital, Noarlunga Health Services and Southern Domiciliary Care and Rehabilitation Service.

The final report includes: papers describing the history of health care reform in Southern Adelaide, descriptions of the methods and results of data collection exercises, a case study of an integration initiative between health, housing and community services, published articles and conference papers and literature reviews and bibliographies on organisational change and health care reform.

The project conducted a final reporting seminar, attended by one hundred people, at Flinders Medical Centre in November, 2001 entitled *Responses to Health Care Reform, Local Insights into Global Trends*. Other output in the past year included papers presented at the Australasian Evaluation Society and the Health Services Research and Policy conferences. Two peer reviewed papers were
published in 2001 with a further two appearing in early 2002. The project team have another article currently being reviewed and three more in the planning and drafting stages.

**Project PEW - Planning and Evaluation Wizard**

**Staff involved:**
*Paul Aylward and Maryanne Martin*

PEW is a software tool designed to guide project workers through the planning and evaluation process, providing step-by-step instructions and assistance to users in straightforward language. Development of PEW was supported by funding through Health Promotion SA and Flinders University of South Australia.

PEW assists in project development and evaluation, helping to identify issues and priorities, evidence of need and policy frameworks, and opportunities for forging alliances and obtaining funding.

The different types of evaluation are discussed and PEW will explain project and evaluation plans and how they should be compiled with examples for you to consult in designing your own plans. Goals, objectives, strategies and process and impact indicators are all fully discussed with clear examples, tips and checklists available at the click of a button.

There is a section on ethical issues and guidelines in research and evaluation, selecting suitable methods, and a host of information about writing reports and presenting posters. Guidance on preparing budgets is also provided with an interactive link to Microsoft Excel which itemises a range of areas to be considered. PEW is crammed with links to relevant sites of interest and ‘real’ examples. As the user progresses through PEW, they are asked to consider their own projects and how they relate to the information provided in order to clarify project and evaluation plans. There is even a glossary of terms provided with clear ‘jargon free’ definitions.

PEW can be accessed through the SACHRU website, www.sachru.sa.gov.au and has been optimised for Netscape browsers but works equally well with Internet Explorer on PCs. PEW is also available on CD for those who wish to have their own copy.
South Australian Performance Indicators and Community Health

Staff involved:  
Gwyn Jolley

The SA Performance Indicators in Community Health Project was completed in February. The report describes the findings of the Performance Indicators project undertaken in 2000-2001 to develop and trial a process for the identification of meaningful and robust performance indicators. The project had funding support from the SA Department of Human Services (DHS) and was undertaken jointly by workers from DHS and community health services across South Australia.

The report was written by the Performance Indicators in Community Health Project Working Group and produced by the South Australian Community Health Research Unit. Gwyn Jolley at SACHRU has been a member of the Project Working Group since its formation in March 2000.

The report outlines the context of the project and some of the challenges for community health as identified in the performance indicator literature. The project activities are described in detail, with appendices containing work-sheets and examples of outcomes from the project’s work.

The findings are discussed in terms of the complexity of community health context, the nature of performance indicators, resources, data collection systems, the potential for transferability of performance indicators across services and language/cultural appropriateness.

Reflection by the working group on the project’s outcomes led to some recommendations and a refined process for identifying and trialing performance indicators. It is anticipated that the findings and recommendations will be used in the development of future service agreements and will be linked to the implementation of the recent review of SA metropolitan community health services.

The report can be accessed via SACHRU’s website:  
http://www.sachru.sa.gov.au

The Newly Arrived Migrant Project

Staff involved:  
Cecilia Moretti

The Newly Arrived Migrants: Evaluation and Development Project has been a joint initiative of SACHRU and The Migrant Health Service (TMHS). The aim of the project was to improve the
capacity of TMHS staff to undertake critical reflection and evaluation of their work with newly arrived migrants and refugees, in order to continually revise and improve services for these vulnerable communities. Work undertaken by TMHS staff includes the provision of health assessments, medical care, counselling services, group work and assistance to their clients to link to mainstream services and programs.

The bulk of the work undertaken in the Newly Arrived Migrants project took place in the 2000/2001 financial year. In August 2001 the final report was completed and published by SACHRU. Contents of the report include:

- A summary of TMHS staff interviews regarding their perceptions of evaluation, and what they see as key issues in the newly arrived migrant context
- An extensive literature review targeting:
  - What evaluation of health programs for newly arrived migrants has occurred elsewhere;
  - What evaluation resources and tools are being used/developed by other organisations;
  - What specific cultural considerations/issues impact on how staff work with and evaluate newly arrived migrant communities from the Former Yugoslavia, the Middle East and the Horn of Africa;
  - What other organisations have done to enhance the evaluation capacity of their staff.
- A report on the staff development Evaluation and Creative Data Collection Methods, including a copy of the workshop booklet distributed to staff.

The Newly Arrived Migrants: Evaluation and Development Final Report was subsequently launched at an event entitled ‘Embracing Migrant Health – future directions for practice and evaluation’, held at the Migrant Resource Centre, Coglin Street Community Centre, Adelaide, on 28 November. Over sixty people attended the launch.
Putting Access and Equity into Practice: Inner Southern Aboriginal/Torres Strait Islander Regional Collaboration Project

There are approximately 900–1000 Aboriginal people residing in the inner south who rarely access Department of Human Service (DHS) services in this region. Provision of a range of Aboriginal specific services has only marginally increased the access rate. The available evidence points to a number of barriers that impede access to, and uptake of health, housing and community services by Aboriginal population. These include the legacy of colonisation, a lack of cultural relevance of services and a failure to accommodate complex needs.

In 2001, SACHRU provided consultation on the preparation of a successful grant from DHS to address the lack of service uptake by Aboriginal people in the inner southern region of Adelaide. In collaboration with the Aboriginal community, this project will develop service systems that support culturally appropriate and responsive service delivery. The model will assist in the identification of an isolated and hidden population of Aboriginal people in the Adelaide metropolitan area as identified by Aboriginal Health Workers and current service statistics. It will implement sustainable mechanisms to build community capacity to address and influence their health, housing and community service needs.

This will be achieved through the implementation of a three-phase project that identifies the Aboriginal community, develops consultation-based sustainable mechanisms of access, and engages in a process of reflective evaluation to develop a sustainable model for DHS agencies in both the inner south and other similar communities. It is envisaged that the model would be transferable to other communities with a similar demographic profile.

The project will build upon the knowledge and community links established through current services provided specifically for Aboriginal people in the inner southern region, such as the Nunga Diabetes Group, Aboriginal Women’s Group, Aboriginal Immunisation Day and the Southern Aboriginal Managers’ Forum.

Staff involved:
Janice Duffy
SACHRU has been contracted to conduct the evaluation. Janice Duffy has been attending steering group meetings and liaising with the Aboriginal Health Council in order to assist with development of a culturally appropriate evaluation plan for the project.

**Civil Society and the Health Sector: examining the potential for effective partnership**

*Staff involved: Fran Baum*

This project is funded by a contract from the World Health Organisation. It concerns the preparation of a book on local civil society organisations and health and builds on earlier work in this area Fran and other members of SACHRU have done. In May 2002 Fran spent a few days in Geneva developing the book proposal. The writing will be done jointly with Dr. Haile Kahssay, Prof. David Sanders and Ruth Stern (South Africa) and Paul Laris (Adelaide). The book will report on the results of a series of studies on civil society and health, including two from South Australia conducted in the western suburbs of Adelaide and in the Hills Mallee Southern Region. The final draft of the book is due to be completed in late 2002 and will be published in 2003.

**Community Alive Through Art: CATA'ering for Rural Communities**

*Staff involved: Cecilia Moretti, Janice Duffy and Danielle Bament*

SACHRU was engaged to evaluate the CATA project, which was a community arts in health initiative auspiced by the Northern and Far Western Regional Health Service. The project was based in Pt. Augusta, but extended its focus to women in Roxby Downs. The project set out to form a women’s group at each of these locations, with a view to creating a play/workshop developed in partnership with local community arts and mental health workers. The idea was for the women to reflect on emotional/mental health and wellbeing issues that affected them, and to write, design and perform their own play about these issues for their local communities and local service providers.

SACHRU’s role in the project was to develop an evaluation framework and data collection tools, and to undertake data collection, analysis and report writing. The final stage of the evaluation took place in the latter half of 2001. SACHRU staff visited Pt. Augusta in October to watch the performance/workshop put on by Pt. Augusta project participants for local service providers, and to conduct a focus group with the latter to discuss what they had gained from the
process. A second visit was undertaken in November to watch the performance of the Roxby Downs community play, at which time an audience survey was conducted to determine community responses to the project/performance. Final focus groups were run on the same weekend for project participants at both sites, in order to gather feedback about what the women gained from their involvement in the project, and their thoughts about how the project was conducted.

These findings were subsequently written up, and the final evaluation report forwarded to the Northern and Far Western Regional Health Service in April 2002.

**Cochrane Collaboration Review**

*Staff involved: Megan O'Grady*

SACHRU has been asked to assist with a systematic review for the Consumers & Communication Review Group of the Cochrane Collaboration. The review will be undertaken by Dr. Anne Johnson and Jayne Sandford of Health Promotion at Flinders Medical Centre and is funded by the Consumers & Communication Review Group of the Cochrane Collaboration.

The aim of this review is to determine the effectiveness of providing written health information in addition to oral information for patients or family members (or significant others) who were discharged from acute hospital settings to home.

SACHRU’s contribution to the systematic review will involve conducting a literature search for relevant studies in this area. Various databases will be searched using a strict search strategy and adopting search methods to meet the requirements of the Cochrane review. These include the Cochrane Review Group Register, the cochrane Controlled Trials Register, MEDLINE, CINAHL, EMBASE, PsychINFO, PsychLIT, ERIC, Sociofile, Austhealth (AML, APAIS – Health, ATSIhealth, RURAL, AusportMed, CINCH – Health and Healthy & Society) and also OVID (Ageline, EBM Review – Cochrane, DARE & Best Evidence, Pre-Medline and PsycARTICLES.

Potential studies that could be used for this review need to fit a number of essential criteria including:

- Type of Study – randomised controlled trial or controlled clinical trial
Type of participant – all ages, patient or family member, all patients discharged from an acute hospital setting to home

Type of Intervention – written information with oral information compared to just oral information

Type of Outcome Measure – readmission rates, recovery times, knowledge, complication rates, service utilisation and costs, confidence, stress levels, satisfaction with services adherence to recommended care.

Talking Realities...Young Parenting Project

Staff involved: Gwyn Jolley and Stacey Masters

The Talking Realities project is auspiced by Dale Street Women’s Health Centre, part of Adelaide Central Community Health Service. In 2001, the project gained further funding from the Commonwealth Department of Health and Ageing and Parenting SA. SACHRU has again been contracted to undertake aspects of the evaluation of the project.

Project workers collect and record feedback sheets from the teachers and students who are recipients of the Talking Realities program. SACHRU will be analysing and reporting on this data. The evaluation will also include focus groups with the peer educators and students, and interviews with teachers and key stakeholders.

In March 2002, the first focus group was held with young parent peer educators to gain information on the training program, presentations to school students, and outcomes for the peer educators to date.

The main data collection will occur in 2002-2003, with a final report due in December 2003.

Coorong Good Food Program

Staff involved: Gwyn Jolley

The Coorong Good Food Program is a two year project funded by Health Promotion SA and auspiced by the Coorong District Council (CDC), Department of Nutrition and Food Services, Women’s and Children’s Hospital (WCH) and Friends of the Women’s and Children’s Hospital (Meningie & Tintinara Auxiliary). The project commenced in February 2001.
The project aims to improve the nutrition of women, children, young people and their families in the Coorong District Council area. It has two objectives:

**Objective 1:** To improve the supply of affordable, good quality, nutritious and safe food available to women, children, young people and their families in the Coorong District Council area.

**Objective 2:** To increase the consumption of nutritious, safe and environmentally-friendly food by women, children, young people and their families in the Coorong District Council area.

The project is working to link a range of stakeholders: Meningie & Tintinara Auxiliary, Coorong District Council, schools and local community organisations.

SACHRU is undertaking aspects of the evaluation and conducted a mid-program review in February/March 2002. This formative evaluation focused on the extent and effectiveness of the promotion of linkages between organisations in the area and processes to increase the consumption of nutritious, safe and environmentally-friendly food.

Focus groups were held with the Steering Committee and representatives from Coorong-based organisations involved in the project.

The second phase of the evaluation will consist of further focus groups in February-March 2003.

**Butt Out for Babe**

**Staff involved:**
Stacey Masters

SACHRU was approached to provide evaluation support to this smoking reduction/cessation project for young pregnant women in southern metropolitan Adelaide. Funded by the Tobacco Control Unit of the Department of Human Services (SA) the program has utilised peer education methodologies in a harm minimisation approach to smoking during pregnancy. Young people have been actively involved in the development of educational initiatives and resources and consultation with hospital and community-based ante-natal and youth programs and providers.

The project is due to be completed in October 2002.
Healthy Food Choice in Family Day Care

Healthy Food Choice in Family Day Care is a new project auspiced by Family Day Care in partnership with Noarlunga Health Services and Flinders University, and funded through the National Child Nutrition Program, Commonwealth Department of Health and Aged Care.

The project aims to support and promote healthy food choices in the family day care setting throughout South Australia. The main strategies of the project are to strengthen organisational commitment for nutrition promotion through the development of a ‘Healthy Food Choice’ policy, to increase care-provider capacity to promote healthy food practices by developing training and resources in consultation with end-users and to increase care-provider confidence to promote healthy food choice to parents. SACHRU has been engaged as the evaluation consultant and will be assisting with the evaluation plan, providing ongoing support, and analysing and reporting on pre and post project surveys.

A pre-project survey of 300 family day providers and 105 field workers was completed in May 2002. The survey established base-line data on attitudes and behaviour in relation to food and nutrition for children in family day care, and information on resource and training needs for family day providers and field workers.

A follow-up survey is planned for October 2003 and the expected completion date for the project is December 2003.

Northern Young Carers

SACHRU was engaged by Northern Carers’ Network Inc to conduct an independent evaluation of the Northern Metro and Country Young Carers Project. The twelve month developmental project aimed to develop a model of service provision for children and young people ranging from five to 25 years who undertake a carer role for a family member within the home environment. Target populations included young carers in the Davoren Park, Barossa and Lower North Regions of Adelaide.
Project objectives included:

- Identifying the numbers of children and young people accessing carer services, and assessing the nature of their roles/responsibilities and perceived needs and gaps in available services
- Developing a positive understanding/image of the young carer role for young carers and program coordinators to use in promoting information about available support and services
- Designing and trialing a model of service provision that addresses the identified needs and issues of young carers
- Establishing greater collaboration among organisations in the northern metropolitan region of Adelaide and statewide, by developing strategic partnerships and forming a statewide body of representatives (SANSYC) from various organisations that have contact with young carers.

Project evaluation methods include:

- Conducting focus groups with young carers and their families
- Sending email surveys to major stakeholders involved in the project
- Conducting telephone interviews with key project workers.

With the project due for completion toward the end of June 2002, data collection is planned to follow shortly thereafter, with the report due later in the year.

'Gear’d Up’ Project

Staff involved:
Paul Aylward

Gear’d Up is a three year project funded through the National Illicit Drug Strategy and based at the Adelaide Diocesan AIDS Council. It aims to minimise the personal, social and economic harm associated with illicit drug use by young gay men. The main strategies include providing one-to-one support, research and training. A major focus of the project over the last twelve months has been the preparation and performance of an interactive drama presentation featuring four young gay men who use illicit drugs performing their own stories and life experiences.

This innovative training has been developed to assist the Gear’d Up project in their work with human service organisations in Adelaide and is designed to gently challenge workers' attitudes,
assumptions and beliefs by exploring the subtle barriers that discourage young gay users of illicit drugs from accessing services.

SACHRU has adopted a methodologically triangulated approach to this evaluation, complementing semi-structured questionnaires for those who attend the drama presentations, with in-depth interviews, focus groups and mini groups.

The evaluation report is currently being drafted.

**Southern Partners Smoking Cessation Project (PATCH)**

**Staff involved:**
Janice Duffy, Cecilia Moretti and Megan O’Grady

Smoking continues to be the single most important cause of preventable disease and more than three quarters of smokers want to quit. SACHRU staff were engaged to conduct part of the evaluation of the *Southern Partners Smoking Cessation Project* known as the PATCH project. The purpose of the PATCH project was to develop and implement systems of evidence based strategies by hospital-based health professionals for the purpose of assisting smokers that seek to quit. Funded by the South Australian Department of Human Services, PATCH is a partnership project involving Flinders Medical Centre, Repatriation General Hospital, Noarlunga Health Services and the Southern Division of General Practice.

The project is based upon the rationale that, although hospitals appear to be a good opportunity in which to intervene with patients who are smokers, clinicians often fail to assess and treat tobacco use consistently and effectively. Common barriers to this include a lack of time and support for staff, reluctance to ‘badger’ patients, inadequate training and confidence, and lack of reminders and prompts. The PATCH project is based on the premise that hospitals provide a window of opportunity for patients to review decisions about smoking and reflect on the health impacts. The project aims to enhance the skills of medical and nursing staff, who are well situated to initiate brief smoking cessation interventions and refer patients to appropriate follow-up by general practitioners or community smoking cessation programs.

To date the project has focused upon resources and training medical and nursing staff in respiratory, antenatal and postnatal clinics to enhance their skills in identifying smokers, providing brief smoking cessation interventions and referring them to a 12
week smoking cessation program run by ‘Quitline’. In order to assess patient satisfaction with the smoking intervention, SACHRU staff has conducted in-depth interviews with former patients of the three clinics. The evaluation will also examine medical and health professional staff satisfaction with the intervention support materials and training. The evaluation report is due to be finished in September 2002.

**Stitch in Time: an evaluation of an early intervention project for HACC eligible clients with simple health-related needs**

**Staff involved:**

*Stacey Masters and Gwyn Jolley*

SACHRU was engaged to conduct an evaluation of the *Stitch in Time* project, a collaborative project involving a range of Home & Community Care (HACC) funded service providers in the northern suburbs of Adelaide and auspiced by Northern Domiciliary Care.

The *Stitch in Time* project is focused on prevention and early intervention, and aims to assist older people, and people with disabilities, to retain their independence. The project recognises the importance of timely support for carers in sustaining the caring relationship and has identified carers as an important client group. Through early intervention, the project aims to reduce the demand for more intensive service provision in the longer term. The Stitch in Time project also aims to increase access for Aboriginal and culturally and linguistically diverse (CALD) populations and has dedicated resources to preparing the groundwork for this to occur.

There were three components of the evaluation:

1. Telephone survey of a random sample of *Stitch in Time* clients, stratified by local government area.
2. Brief survey of project partners to explore project experiences and learning and identify specific issues for focus group discussion.
3. Focus group discussion for project partners.

The client survey addressed:

- Satisfaction with referral and assessment and communication processes
- Perceived benefits of the program, personally
Efficacy of interventions (e.g. specific equipment or home modification, frequency of cleaning service)

Broader program benefits (i.e., benefits for carers and/or family members)

Economic or other barriers to program utilisation.

Discussions with project partners addressed:

Their experience of the collaborative aspects of the project

Progress in working towards inclusive services for ATSI and CALD populations

Learning outcomes – re collaborative, early intervention and inclusive approaches to service delivery and strategies for service coordination

Immediate and intermediate outcomes – assessing the impact of the project on client well-being, and the longer term benefits in building organisational and sector capacity for early intervention, engaging ATSI and CALD populations, and service coordination.

Data collection occurred from February to April and a draft evaluation report was submitted in June 2002.

**Medicine Safety in an Urban Aboriginal Community**

*Staff involved:*

Gwyn Jolley

This project is auspiced by Adelaide Central Community Health Service and is based at the Parks Community Health Service. Funding was obtained from the Commonwealth Department of Health and Aged Care, Quality Use of Medicines Evaluation Program.

The project aims to:

- Raise awareness of medicine use as a health issue within the Aboriginal Community of the Western and Central Suburbs of Adelaide
- Assist Aboriginal people to become more aware of medicines, their benefits and risks of misuse
- Assist Aboriginal people to make informed choices and decisions about medication use
- Assist Aboriginal people to become more skilled in the management of their medications
- Achieve the safe use of medicines by Aboriginal people by minimising misuse
Change attitudes to the use of medication by the targeted groups
Create an environment where the best possible use of medications by Aboriginal people can be made.

The project commenced in March 2000 and is designed in three stages: awareness raising, program development and program implementation. The project produced a resource kit on safe medication use for Indigenous people.

SACHRU has been involved in establishing an evaluation framework, providing ongoing support by representation on the project advisory group, undertaking evaluation tasks and writing progress reports for the funder. Main evaluation methods were a survey of project stakeholders and three short workshop sessions with community members to disseminate the resource kit and gain feedback on the presentation and content.

The evaluation revealed that the project has increased awareness of medicine and health issues within the direct participants of the project, and possibly beyond. A major strength of the project was its highly participatory approach and broad networks developed.

Final reports are due to the Commonwealth and Adelaide Central Community Health Service by 31st July 2002.

**Moving the focus – Health Promotion in Domiciliary Care**

*Staff involved: Janice Duffy and Stacey Masters*

In 2001, SACHRU staff consulted on the evaluation of a project for the Flinders and Far North Community Health Service at Pt Augusta. The purpose of the project was to orientate Domiciliary Care staff towards becoming a health-promoting workforce. The project goal was to ensure that health promotion action is effective and sustainable by building the capacity of the domiciliary care team, local organisations and community groups. In order to facilitate sustainable organisational change toward a health-promoting workforce, the project focused upon promoting community/workforce and organisational development and appropriate resource allocation. The aim was to achieve organisational change by:

- Providing continuing education, professional development, professional support/supervision and performance management systems
Facilitating changes in organisational plans, policies, and structures as well as in work practices and leadership support.

Providing adequate financial, human, administration and material resources.

SACHRU staff supported the project office to conduct the evaluation.

The evaluation combined workplace data (designed to measure the scope and extent of capacity building strategies) with a questionnaire for both staff and the reference group (n = 52) and semi-structured in-depth interviews (n = 12) conducted with a purposeful sample of employees and the reference group. The evaluation results demonstrated that all three of the evaluated groups—staff, home support workers and the reference group—reported an increase in health promotion knowledge as a result of the workshops provided throughout the project. Feedback from the interviews indicated that training received throughout the year had contributed to an increasingly broader perspective of health and wellbeing.

Some concerns were expressed in the evaluation about the sustainability of project outcomes as external funding for the project officer position drew to a close. Some staff commented that it was too soon to lose a key person. The Health Service was able to allocate funding to extend the project officer position for three months. This provided a transitional period in which to consolidate achievements, reaffirm other sources of support for health promotion activity and achieve closure.

The evaluation also identified barriers that may affect the capacity of the team to be a more health promoting workforce. These included the current workload in direct client service provision and consumer and community expectations of Domiciliary Care Service, and the need for ongoing staff development and organisational support for changes in work practice. Maintaining staff motivation was identified as a potential barrier to sustaining a health promotion culture within the team.

In summary, the evaluation reported that general support for the project was excellent. The workshops and the steering group and reference group meetings were well attended throughout the year, with members indicating satisfaction with the progression of the project. Domiciliary Care staff were encouraged to embrace the project and utilise the Project Officer’s skills and support.
while they had the opportunity. Team Leader support and flexibility assisted in staff feeling confident to try new ideas and undertake further workforce development.

The success of the consumer reference group was a highlight of the project. It proved to be a very successful model of consumer and community participation and has yielded direct benefits for the project and individual members. Members have strongly advocated for the continuance of the group in 2002 and are already discussing recruitment and promotion strategies.

Although the project has been extremely successful the evaluation results showed that further strategies to consolidate organisational gains may be required. The workload of the majority of Domiciliary Care staff is high and there is limited time for staff development. There is an identified need to reorient work practice to include further time for planning and implementation of primary health care initiatives. Staff will require ongoing support and encouragement to maintain and update health promotion and primary health care knowledge and skills and to reorient their practice. The evaluation demonstrated that on-site support, such as the project officer employed on this project, as part of a comprehensive set of organisational supports and structures for staff and community participation, is an effective strategy in facilitating organisational change.

**Consumer Participation in Safety and Quality at Flinders Medical Centre – The search for a consumer-focused model**

**Staff involved:**
Danielle Bament

This research project was funded by the Commonwealth Department of Health and Aged Care, Australian Council for Safety and Quality in Health Care, Safety Innovation in Practice Program.

The project aimed to:

- Investigate if, and how, consumers (users and their families), consumer and community representatives and members of the broader community would prefer to be involved in improving the quality of services in Flinders Medical Centre (or hospitals in general for members of the broader community)
Explore some of the issues for consumers and consumer and community representatives which may inhibit or enhance their participation.

Develop a consumer participation model for Flinders Medical Centre that is based on the findings of the study.

SACHRU assisted with the project by undertaking interviews and focus groups with consumers and consumer representatives to identify how people would prefer to be involved in improving the quality of services at Flinders Medical Centre, the structures that exist to allow them to be involved, and the type of support they would require in order to have further involvement.

Findings suggest that a developmental model of consumer participation is needed in order to build capacity in Flinders Medical Centre, staff and consumers, and to develop an organisational model of participation.

_Asthma in Older People: a needs assessment_

_Asthma South Australia_ engaged SACHRU to assist in identifying the needs of older people with asthma who live in the Prospect and Walkerville Local Government areas, and their carers.

Asthma in older people presents a number of challenges in terms of medical diagnosis (because of co-morbid cardiac and respiratory conditions) and management (due to lung changes associated with ageing and the frequency of polypharmacy in this population). In older people, self-management may also be complicated by loss of fine motor control or other physical and neurological conditions often associated with ageing.

As part of the evaluation, SACHRU recruited older people with asthma via the ‘Messenger’ newspaper, community groups and Asthma SA client database. Telephone interviews were conducted with a small sample of older people (n = 13) and survey responses were also collated.

Conversations with older people with asthma suggested that compliance may be less than optimal for people who prefer to take medication “when I need it” rather than as a preventive measure. Some older people reported not being sure that their respiratory condition “is really asthma” and/or didn’t experience much relief from their medication. Importantly, some were reluctant to discuss these concerns with their doctor.

**Staff involved:**

*Stacey Masters and Gwyn Jolley*
SACHRU also approached general practitioners, local pharmacists/assistants and nurses working in residential aged care settings regarding their work with older people with asthma, and their learning needs. The data from the needs assessment was used to develop and refine Asthma SA educational programs and forums specific to the needs of older people with asthma and informal and formal care-providers in the community.

The project was funded by the Northern Communities Health Foundation (an initiative of the former Northern Community Hospital).

Reciprocity in Education

The *Reciprocity in Education Project* was a twelve-month pilot activity under the auspices of the Adelaide Central Community Health Service (ACCHS) that aimed to develop and trial a model of interactive learning between three strategically selected Non-English Speaking Background (NESB) community groups (Persian, Cambodian and Italian) and mainstream mental health services.

The project brought together a diversity of interest groups and recognised experts in the mental health area including: SA Trans-cultural Mental Health Network (NESBWEB) and the Australian Trans-cultural Mental Health Network (ATMHN), health workers, academics from the three South Australian universities and prominent national and international figures. The project also sought to involve the expertise and knowledge of the NESB communities.

Evaluation data was obtained through applying a multi-facetted and methodologically triangulated approach incorporating surveys, telephone interviewing, focus groups, mini groups, in-depth interviews and systematic observations.

A strategy for addressing the NESB participants in the evaluation, many of whom had experienced trauma, was also compiled. A number of innovative steps were taken to ensure authentic accounts were obtained and that participants felt free to fully discuss their experiences of the project. The evaluation adopted a reflexive practice and a 'constant comparison' approach borrowed from grounded theory; the cooperation of bi-lingual project workers in a 'participatory' sense was also enlisted.
The report provides a thorough evaluation of the *Reciprocity in Education Project*. The report also addresses a range of methodological challenges faced by evaluators who have to interview traumatised people from different cultural and socio-political backgrounds as part of the evaluation process.

**Puppets Promoting Positive Health in the North (3PH Project)**

SACHRU was engaged to undertake an independent evaluation of the Health Promotion SA funded *Puppets Promoting Positive Health* (3PH) project, auspicied by the Northern Metropolitan Community Health Service (NMCHS), and based at the Elizabeth Community Health Centre.

The project has sought to use puppetry to develop positive approaches to mental and emotional health issues that relate to loss and grief in the lives of disadvantaged Aboriginal, Vietnamese and other communities in the Northern region. It also aimed to build the capacity of NMCHS staff to draw on this community arts, health promotion tool for future projects and activities in the North.

In the 2001/2002 period, SACHRU completed the final stages of the evaluation:

- Audience surveys were conducted at each of the sixteen puppetry performances staged at various locations in the North (11 English, four Vietnamese, and one Indigenous). The surveys sought to determine the views of the wider community about the impact and significance of the messages embodied in the performance, and the usefulness of the puppetry approach in promoting these messages.
- Two focus groups were conducted with project participants who played a performing or associated stage role in the puppet show, to gather feedback about the process, and how the participants felt they had benefited from their involvement. One focus group was conducted with NMCHS workers and one with community members.
- A final focus group was held with key project workers, to gather overall feedback about the second stage of the project.

Feedback from these groups revealed that while the project required a lot of energy and dedication by those involved, it has...
left them with a great sense of achievement and a passion for the community arts. This sense of achievement was reinforced by the positive feedback received via the audience surveys, demonstrating a strong community response to the performance content and medium. There were particular benefits for the NMCHS workers involved, who reported developing knowledge and skills in the area of community arts to take back to their various organisations. The final evaluation report was completed and forwarded to the Elizabeth Community Health Service in June 2002.

**Kokotinna: Cultural Awareness Through Action**

**Staff involved:**
- Paul Aylward
- Cecilia Moretti

SACHRU was contracted to conduct a process evaluation of the Flinders University *Kokotinna Program on Aboriginal and Torres Strait Islander Cultures and Health*.

The aims and objectives of the *Kokotinna Program* included:

- Enhancing staff capacity to incorporate Indigenous health perspectives into their practice
- Enhancing staff capacity to relate with Indigenous peoples as colleagues and students
- Contributing to strengthening Faculty support for Indigenous staff and teaching of Indigenous students
- Contributing to advancing the health of Indigenous peoples.

The process evaluation sought to access the views and opinions of former and current members of the Kokotinna Implementation Team. This multi-disciplinary group was comprised of representatives from the Department of Public Health, Yunggorendi, the School of Nursing, and the Medical Education Unit in the School of Medicine.

A variety of methods was employed to maximise the response rate for this evaluation. An email self-completion survey was sent to all committee members, with face-to-face interviews, telephone interviews, and a self-completion postal questionnaire offered as alternative modes of providing information if preferred by respondents.

Despite a number of identified problems, the process of implementing the *Kokotinna Program* was shown to have been successful. The difficulties encountered in bringing together a
variety of interest groups and balancing different views were perceived to generate both positive and negative perspectives regarding the Program. However, the multi-disciplinary and inter-sectorial strengths combined with the commitment of some key members have produced an outcome that has been positively welcomed in varying degrees.

The *Kokotinna Program Process Evaluation Final Report* was published by SACHRU in February 2002.

**Evaluation of Eat Well SA**

**Staff involved:** Gwyn Jolley

A consortium, including SACHRU, completed an evaluation of Eat Well SA in December 2000. SACHRU was contracted to undertake some revisions and editing of the evaluation report during 2001. The final report was completed in November 2001.
RESEARCH AND EVALUATION TRAINING AND RESOURCES

Research Training Workshops

SACHRU’s Service Agreement with the Department of Human Services includes a training role specified as:

“To provide training, staff development and support to community and primary health care workers related to research, evaluation and primary health care development”.

We fulfil this role by providing a core program of training seminars, developing ‘tailor made’ workshops in response to field requests and by contributing to one-off talks/seminars.

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A total of 134 attendances were registered for the SACHRU program workshops. Participants were from metropolitan and country community health services, South Australian Department of Human Services central office, hospitals, universities, and other government, non-government and community organisations.

**Healthy Cities Short Course**

There were 27 participants in the Healthy Cities Short Course including ten from overseas, two from the Northern Territory, one from Victoria, one from Western Australia and thirteen from South Australia.

**'Research Matters' Newsletter**

Three editions of the 'Research Matters' newsletter were produced during 2001-2002, in August and December 2001, and March 2002. The mailing list for the newsletter includes local, national and international groups, organisations and individuals. ‘Research Matters’ provides the opportunity for the Unit to detail new and existing research projects, consultation requests, information on training seminars, conferences and publications. The newsletter is also available in electronic form through the SACHRU web page.
SACHRU Publications

SACHRU’s role in disseminating research and evaluation findings, together with our commitment to training and support for people working in the primary health care/community health sector, has resulted in the publication of the following resources this year:

- Project PEW – Planning and Evaluation Wizard
- Newly Arrived Migrants: Evaluation and Development
- Evaluation of Reciprocity in Education: a piloted model of interactive learning between migrant communities and mainstream mental health services
- Multi-cultural Mental Health Access Program (McMHAP) Review
- Healthy Cities Evaluation Testing Project: Evaluation of Noarlunga Community Action on Drugs
- Health Care Reform in Southern Adelaide Evaluation Project
- Peer Education Literature Review

The Research Publications catalogue continues to be circulated through various conference venues in South Australia and interstate with continued interest in our training resource materials. Whilst a CD version of Project PEW – Planning and Evaluation Wizard (a web-based training resource) was distributed free to community health services in South Australia, it remains a very popular addition to our publications list.

SACHRU Website

SACHRU’s website continues to provide information on staff, activities and publications. The inclusion of a Visitor’s Book has proved very popular with many visitors taking the time to provide details about themselves and their reasons for visiting the site. This information is very much appreciated and is used to ensure that the site remains a relevant and useful resource.
STAFF DEVELOPMENT

Conferences/Seminars attended by SACHRU Staff

14th Annual Health Promotion Conference, Sydney, June 2002
HERDSA Conference, Newcastle NSW, July 2001
General Practice & Primary Health Care Research Conference, Melbourne, May 2002
3rd International Conference on Drugs & Young People, Randwick NSW, May 2002

Workshops and Training attended by SACHRU Staff

Population Health Sector Support Workshop, April 2002, Flinders Medical Centre
NH&MRC workshop, July 2001, Adelaide
Arts and Wellbeing Forum, March 2002, Adelaide Festival 2002
Professional Presentation Skills, August 2001, Flinders Medical Centre
Management Training, August/September 2001, Flinders Medical Centre
Advanced Statistics, September 2001, Flinders University of SA
PowerPoint, October 2001, Flinders Medical Centre
Conflict Resolution Workshop, October 2001, Flinders Medical Centre
NUDIST, November 2001, Flinders University of SA
EndNote Training, April/June 2002, Flinders University of SA
What's new in the library?, April 2002, Flinders Medical Centre
How to apply for a job & understand the selection process, June 2002, Flinders Medical Centre
Minute Taking Skills, June 2002, Flinders Medical Centre
COMMITTEE MEMBERSHIP

Healthy Cities (Noarlunga) Management Committee
Gwyn Jolley

Migrant Health Service Program Review Committee
Paul Aylward

Migrant Health (Dept. of Human Services)
Cecilia Moretti

Flinders Institute of Health Research
Fran Baum / Janice Duffy

SACOSS Policy Committee
Gwyn Jolley

Public Health Research Advisory Committee
Fran Baum
(Public Health Association of Australia)

2002 Review of National Hepatitis Strategy
Fran Baum
1999-2000 to 2003-04

Reference Committee Noarlunga Towards a Safe
Fran Baum
Community

Member, Editorial Board, Australian Journal of
Fran Baum
Primary Health

Member, Editorial Board, Critical Public Health
Fran Baum

Member, Editorial Committee, Journal of
Fran Baum
Epidemiology and Community Health

Member, Editorial Board, Australian and New
Fran Baum
Zealand Journal of Public Health

Member, Editorial Board, Australian and New
Fran Baum
Zealand Journal of Public Health
PUBLICATIONS AND CONFERENCE PRESENTATIONS

Refereed Papers


Baum F. and van Eyk H. (2002) Learning about interagency collaboration – trialing collaborative projects between hospitals and community health services, Health and Social Care in the Community, 10 (4) pp 262-269


van Eyk H. and Baum F. (2002) The trials and tribulations of evaluating health system change using an iterative approach to compile the voices from the field, Qualitative Health Research, 13 (2), February

Books, Chapters, Published Conference Papers and Reports


**Conference Papers and Presentations**


**Keynotes, Plenary and Invited Addresses**


COLLABORATION WITH THE DEPARTMENT OF PUBLIC HEALTH

The Unit continues to have a close link with the Faculty of Health Sciences, Flinders University of South Australia, through the Director, who is Professor and Head of the Department of Public Health (DPH), School of Medicine, Gwyn Jolley, Janice Duffy and Paul Aylward have academic status within the School. The SACHRU and Department of Public Health hold joint staff meetings and a number of research projects are run jointly by the two organisations. In 2001-2002, the two organisations have developed a more collaborative training program with SACHRU and DPH staff contributing to the core workshop program and the university-led short courses in public health research and evaluation.
**Administrative Arrangements**

The South Australian Community Health Research Unit is administered by Flinders Medical Centre (see organisational chart on page 47). With the exception of the Director, all SACHRU staff are employees of Flinders Medical Centre. SACHRU is incorporated into Flinders Medical Centre’s service agreement with the Department of Human Services.

Flinders Medical Centre is an Equal Opportunity employer. Occupational Health and Safety is administered through Flinders Medical Centre.

**2001/02 Budget**

SACHRU recorded a total budget allocation, (including budget variations and carry over from 00/01) of $391,000 for 2001/02 from the Department of Human Services. Flinders Medical Centre provides full financial accounting services to the Unit and financial statements are provided as part of the Flinders Medical Centre reports.